

**2003-FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **F21514**

1. Entity Name
MERRILL H. EPSTEIN, M.D., P.A.



FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90449 003 ***150.00

0086726 FP

Principal Place of Business
**200 W. PALMETTO PK RD
#306
BOCA RATON FL 33432
US**

Mailing Address
**200 W. PALMETTO RD
#306
BOCA RATON FL 33432
US**

11001848



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2059063**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EPSTEIN, IRENE A.
200 W. PALMETTO PK RD. #306
BOCA RATON FL 33432**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
EPSTEIN, MERRILL H
200 W PALMETTO PK RD 306
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
EPSTEIN, IRENE A
200 W PALMETTO PK RD 306
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED A EPSTEIN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-03 (SGI)368-8101
Date Daytime Phone #

CR2E034 (10/02)

attachment #

IRENE A EPSTEIN *# 21514*

CERTIFIED PUBLIC ACCOUNTANT

200 WEST PALMETTO PARK ROAD • SUITE 306
BOCA RATON, FLORIDA 33432
(561) 368-7800 • (800) 237-9802 • FAX (561) 620-3090
E-MAIL: EPSTEINENT@AOL.COM

11001848

April 17, 2003

UNIFORM BUSINESS REPORT
DIVISION OF CORPORATIONS
PO BOX 1500
TALLAHASSEE, FL 32302-1500

DEAR SIRs:

ENCLOSED PLEASE FIND THE FOLLOWING 2003 UNIFORM BUSINESS REPORTS:

Sunshine Senior Services, Inc
Basic Bookkeeping, Inc
Psychiatric Management, Inc
Merrill H. Epstein, MD PA

PLEASE RECEIPT AND RETURN THE ENCLOSED COPY OF THIS LETTER.

THANK YOU FOR YOUR PROMPT ATTENTION TO THIS MATTER.

SINCERELY,

Irene A Epstein

IRENE A EPSTEIN, CPA

ENCL

MEMBER

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS